



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED

By Carol Day at 8:45 am, Mar 17, 2014

Complete this report in duplicate at the time of the regular monthly preventative maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN 102458	PRINTER SN 093.3578.252	DATE OF INSPECTION 03/04/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 600 E. Walnut Columbia		TIME OF INSPECTION 5:38 pm

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

☒ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)

☒ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)

☒ PRINTER WORKING PROPERLY

☒ TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

☒ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE

☒ STANDARD SUPPLIER Guth Labs LOT # 13210 EXP. DATE 07/29/2015

☒ SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN SD2761 SIMULATOR EXP DATE 01/07/2015

☒ CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

- ☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE
☐ 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE
☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 = .099

TEST 2 = .099

TEST 3 = .100

☒ RFI DETECTOR OPERATING

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS	1	(0-.04)	0	(.05-.09)	1	(.10-.14)	2	(.15-.19)	1	(OVER .19)	0
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List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

INSPECTING OFFICER

SIGNATURE

PRINT NAME

Nathan Turner

TYPE II PERMIT NUMBER/EXPIRATION DATE

220411 12/20/14

TELEPHONE NUMBER

(573) 874-7652

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
2875 James Boulevard
Poplar Bluff, MO 63901



GUTH LABORATORIES, INC.

660 NORTH 16TH STREET • HARRISBURG, PA 17111-4511 • TELEPHONE 717-651-5170

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 13210 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on July 31, 2013, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1216% (w/vol) ethyl alcohol. The expiration date for this lot number is July 29, 2015 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C \pm 2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L \pm 3%.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Certified Reference Standard lot number EN12211-02 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.

AS IV Serial not 182400
Version not 0040

TEST RECORD 00774

Form Date Time 17:40

Air Blanks
03/04/14 17:41 .000
Calibration Check
20 03/04/14 17:41 .000

Subject Name

Test

Subject I.D.

Operator Name I.D.

Turner 1585

Location

CPD

AS IV Serial not 182400
Version not 0040

TEST RECORD 00772

Form Date Time 21:00

Air Blanks
03/04/14 17:38 .000
Calibration Check
22 03/04/14 17:38 .000

Subject Name

~~Turner~~ Test

Subject I.D.

Operator Name I.D.

Turner 1585

Location

CPD

AS IV Serial not 182438
Version not 0040

TEST RECORD 00775

Form Date Time 21:51

Air Blanks
20 03/04/14 17:51

Subject Name

Test

Subject I.D.

Operator Name I.D.

Turner 1585

Location

CPD

AS IV Serial not 182438
Version not 0040

TEST RECORD 00773

Form Date Time 21:00

Air Blanks
03/04/14 17:39 .000
Calibration Check
20 03/04/14 17:39 .000

Subject Name

Test

Subject I.D.

Operator Name I.D.

Turner 1585

Location

CPD